

Bullock Co. Correction  
(INSTITUTION)

(Exhibit Four (4))

# SEGREGATION UNIT RECORD SHEET

INMATE NAME: Richard Wright  
 VIOLATION <sup>31</sup> OR REASON: Assault On Another Inmate  
 DATE & TIME RECEIVED: 11/3/04 10:40 PM  
 PERTINENT INFORMATION: \_\_\_\_\_

AVIS NO: B/187140 CELL: # 4  
 ADMITTANCE AUTHORIZED BY: Lt. Babers  
 DATE & TIME RELEASED: \_\_\_\_\_

DATE	SHIFT	MEALS			SH	EXERCISE	MEDICAL VISIT	PSYCH VISIT	COMMENTS*	OIC SIGNATURE
		B	D	S						
11/15	MORN	Y			N	N	<del>Richard Wright</del>	N	# Med	D. Johnson, Col
	DAY		Y		N	12:30-2:30	<del>Richard Wright</del>	N	Med	D. Johnson, Col
	EVE			Y	N	N	<del>Richard Wright</del>	N	Med	D. Johnson, Col
MON										
11/16	MORN	Y			N	N	Lindberg	N	Med	Julia Elliot
	DAY		Y		N	R	Richard Wright	N	Med	D. Johnson, Col
	EVE		Y	Y	Y	N	Richard Wright	N	Med	D. Johnson, Col
TUE										
11/17	MORN	Y			N	N	M. Green	N	Med	Julia Elliot
	DAY		Y		N	N	Richard Wright	N	Med	D. Johnson, Col
	EVE			Y	N	N	Richard Wright	N	Med	D. Johnson, Col
WED										
11/18	MORN	Y			N	N	M. Green	N	Med	Julia Elliot
	DAY		Y		N	9:52-10:41	Richard Wright	N	Med	D. Johnson, Col
	EVE			Y	Y	N	Richard Wright	N	Med	D. Johnson, Col
THUR										
11/19	MORN	Y			N	N	M. Green	N	Med	Julia Elliot
	DAY		N		N	confronted	Richard Wright	N	Med	D. Johnson, Col
	EVE			Y	N	N	Richard Wright	N	Med	D. Johnson, Col
FRI										
11/20	MORN	N			N	N	M. Green	N	Med	Julia Elliot
	DAY	Y	N		N	9:52-9:55	Richard Wright	N	Med	D. Johnson, Col
	EVE			Y	N	N	Richard Wright	N	Med	D. Johnson, Col
SAT										
11/21	MORN	N			N	N	M. Green	N	Med	Julia Elliot
	DAY	Y			N	9:52-10:15	Richard Wright	N	Med	D. Johnson, Col
	EVE			Y	R	N	Richard Wright	N	Med	D. Johnson, Col
SUN										

Pertinent Info: i.e., Epileptic; Diabetic; Suicidal; Assaultive

Meals/ SH: Shower- Yes (Y); No (N); Refused (R)

Exercise: Enter Actual Time Period and Inside or Outside (i.e. 9:30/10:00 IN; 2:00/2:30 OUT)

Medical: Physician will sign each time the inmates is seen.

Psych: Psychological Counselor will sign each time the inmate is seen.

Comments: i.e., Conduct; Attitude, etc. \*Use reverse side for additional comments and include date, signature, and title.

OIC Signature: OIC must sign all record sheets each shift.

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 CONFIDENTIAL RECORD  
 NOT TO BE PHOTO COPIED

**Bullock Co. Correctional**  
(INSTITUTION)

(Exhibits Four(4))

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38  
 AIS NO: 01187140 CELL: # 84  
 ADMITTANCE AUTHORIZED BY: Lt. Babers  
 DATE & TIME RELEASED: \_\_\_\_\_

DATE	SHIFT	MEALS			SH	EXERCISE	MEDICAL VISIT	PSYCH VISIT	COMMENTS*	OIC SIGNATURE
		B	D	S						
11/8	MORN	Y			N	N	MR. [unclear]	N	David	H. Johnson, Col
	DAY						1510		1510	mons
	EVE			Y	N	N	MSLP	N	MSLP	[unclear]
MON										
11/9	MORN	Y			NO	NO	MR. [unclear]	N	1 med	Julia [unclear]
	DAY	Y	Y		NO	10:35-11:40	MSLP	NO	1 med	[unclear]
	EVE			Y	Y	N	MSLP	N	0 med	[unclear]
TUE										
11/10	MORN	Y			NO	NO	MR. [unclear]	N	0 med	Julia [unclear]
	DAY	Y	Y		NO	Cancel	MSLP	N	0 med	[unclear]
	EVE			Y	N	N	MSLP	N	0 med	[unclear]
WED										
11/11	MORN	N			NO	NO	MR. [unclear]	N	0 med	Julia [unclear]
	DAY	Y	N		N	N	MSLP	N	0 med	[unclear]
	EVE			Y	Y	N	MSLP	N	0 med	[unclear]
THUR										
11/12	MORN	Y			N	N	MR. [unclear]	N	0 med	H. Johnson, Col
	DAY		N		N	12:00-12:45	MSLP	N	0 med	[unclear]
	EVE			Y	N	N	MSLP	N	0 med	[unclear]
FRI										
11/13	MORN	N			N	N	MR. [unclear]	N	0 med	[unclear]
	DAY	Y	Y		N	N	MSLP	N	0 med	[unclear]
	EVE			Y	Y	N	MSLP	N	0 med	[unclear]
SAT										
11/14	MORN	N			N	N	MR. [unclear]	N	0 med	[unclear]
	DAY	Y			N	10:10-10:50	MSLP	N	0 med	[unclear]
	EVE			Y	Y	N	MSLP	N	0 med	[unclear]
SUN										

Pertinent Info: i.e., Epileptic; Diabetic; Suicidal; Assaultive; etc.

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